PTO/SB/05 (06-03) Approved for use through 07/31/2003. OMB 0651-0032 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 106586.170 Attorney Docket No. UTILITY PATENT APPLICATION Lee A. Core First Inventor Hemostasis Valve TRANSMITTAL EM197369805US (Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 1. 🗸 CD-ROM or CD-R in duplicate, large table or Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🔽 Specification Total Pages Computer Reader Form (CRF) (preferred arrangement set forth below) Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) Statements verifying identity of above copies - Detailed Description **ACCOMPANYING APPLICATION PARTS** Claim(s) - Abstract of the Disclosure Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 5 Power of 10. 37 CFR 3.73(b) Statement (when there is an assignee) Attorney 5. Oath or Declaration [Total Sheets 11. English Translation Document (if applicable) a. Newly executed (original or copy) Copies of IDS Information Disclosure Statement (IDS)/PTO-1449 Citations b. Copy from a prior application (37 CFR 1.63(d)) 13. **Preliminary Amendment** (for continuation/divisional with Box 18 completed) 14. 🗾 Return Receipt Postcard (MPEP 503) (Should be specifically itemized) DELETION OF INVENTOR(S) 15. Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR 16. Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 6. 🔽 Application Data Sheet. See 37 CFR 1.76 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Continuation-in-part (CIP) Divisional of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name Address City State Zip Code Country Telephone Fax Name (Print/Type) Registration No. (Attorney/Agent) 36.476

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Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT 834.00

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Application Number	
Filing Dat	
First Named Inventor	Lee A. Core
Examiner Name	
Art Unit	
Attorney Docket No.	106586.170

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
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FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	E 4.61		
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1002 330 2002 165 Design filing fee	1401 320 2401 160 Notice of Appea			
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,300 2453 650 Petition to revive - unintentional			
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1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809 750 2809 375 Filing a submission after final rejection (37 CFR 1.129(a))			
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SUBMITTED BY		(Complete (if applicable)
Name (PrintType) David L Caverage	Registration No. (Attorney/Agent) 36,476	Telephone 617-526-6000
Signature And Many 9		Date 10/9/03

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